

Swine Flu and Tamiflu

Tamiflu is an anti-viral medication useful for treating Swine Flu. Here are the facts about this drug:

- **First:** It's only available by prescription.
- **Second:** It must be started within 48 hours of the start of flu symptoms to have an effect.
- **Third:** It usually reduces the time your child is sick by 1 or 2 days. Also, it improves the symptoms, but does not eliminate them.
- **Fourth:** There is a downside. Tamiflu causes vomiting in 10% of patients and nausea in many more.

Now that you know Tamiflu isn't a silver bullet, which children should receive Tamiflu?

The Centers for Disease Control recommends Tamiflu be prescribed for all **High-Risk** children who come down with Swine Flu symptoms. **High-Risk** means children who are at increased risk of coming down with complications of Swine Flu, such as pneumonia. **High-Risk** children include the following: those with lung disease (such as asthma), heart disease (such as a congenital heart disease), weak immune system (such as cancer), neurological disease (such as muscular dystrophy), diabetes, sickle cell disease, kidney disease, diseases requiring long-term aspirin therapy or other chronic diseases. Being pregnant is also a risk factor. Healthy children are only at increased risk if they are less than 2 years old. These risk factors are the same ones used for treating regular seasonal flu.

What about all the other healthy children who are over 2 years old?

The CDC recommends that these **Low-Risk** children **not** receive Tamiflu, unless they need to be hospitalized or come down with a complication such as pneumonia. Both of these events are uncommon.

Remember: If your child is not in the **High-Risk** group, he will probably have symptoms that are similar to those seen with regular seasonal flu. Most children recover from Swine Flu easily with supportive care of the main symptoms. Tamiflu is not needed.

If you have other questions about Tamiflu, talk with your healthcare provider.

Author: Barton D. Schmitt MD, Denver, CO. Copyright 2009. Revised 9-28-2009

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